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CONFIRMATION NO. 4248

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10/506,617	10/29/2004 RULE	704	2626	258817US2PCT

APPLICANTS
 Gaetano Cascini, Firenze, ITALY;

**** CONTINUING DATA *******
 This application is a 371 of PCT/EP03/01554 02/17/2003 /LS/

**** FOREIGN APPLICATIONS *******
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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		ITALY	8	32	2
Verified and /LAMONT M SPCONEV/					
Acknowledged Examiner's Signature	Initials				

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TITLE
 System and method for performing functional analyses making use of a plurality of inputs

FILING FEE RECEIVED 1136	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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